

Municipal Building
1 W. Maple Avenue
Merchantville, NJ 08109

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BACKYARD CHICKEN APPLICATION FORM

Applicant Name: _____

Applicant Address: _____
Street City/State/Zip

Phone: _____ Email: _____

Please answer the following questions:

Have you ever owned chickens? ☐ Yes ☐ No

Is the applicant the owner of the property where the chickens will be kept? ☐ Yes ☐ No

** if NO: the applicant must provide the written consent of the owner of the property
to keep chickens at the above address*

Have you attended the mandatory Chicken Care Course? ☐ Yes ☐ No

How many chickens do you plan to own? _____

No more than EIGHT hen/female chickens for personal use only and not for any business or commercial use are permitted. Roosters, male chickens, are prohibited.

By agreeing to participate in the Backyard Chicken Program, the applicant acknowledges that they have read the attached Animal Ordinance #19-07 containing rules and regulations along with confirmation that their property meets the requirements of the ordinance. They acknowledge that they may not begin raising hens until they complete the required course. They agree to meet with the chair of the Backyard Chicken Advisory Board prior to submitting an application. Should they at any time desire to withdraw from the program, or if a rooster is unintentionally purchased, they will reach out to the chair of the Backyard Chicken Advisory Board so that their hens or rooster can be humanely re-homed.

I certify that all statements on this application are true and correct under the penalty of perjury. I understand that any false information may result in the revoking of the permit.

Applicant Signature: _____ **Date:** _____

FOR OFFICIAL USE ONLY

Verification of Attendance of Chicken Course: _____ Date: _____

Verification and Date of Interview with Applicant: _____

Approval to Participate in Program: _____

\$25 Application Fee (and yearly renewal thereafter) Received: _____

Chicken Permit No. _____ Permit Expires: Dec 31st, 20____

Issued by: _____ Date: _____